

# LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

902  
Lobbyist's Registration Number

## Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70808, (225) 763-8777 or (800) 842-6630. No fee is required.
- This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

## FOR OFFICE USE ONLY

Postmark Date: 06/23/06

LSOPP

1060973

1. NAME Williams John MI  
Last First

2. BUSINESS PHONE (225) 343-3436

3. BUSINESS ADDRESS 575 N. 8th St Baton Rouge LA 70802  
Street and No. City State Zip

MAILING ADDRESS 11 11 11 11  
Street and No. City State Zip

4. EMPLOYER Gen. Bess Industry League of LA

5. EMPLOYER'S ADDRESS Same  
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes \_\_\_\_\_ No \_\_\_\_\_

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name BellSouth  
Address 901 Hugh Vallis Rd S. Lafayette LA 70508  
Business or purpose \_\_\_\_\_

☐ New Representation  
Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

☒ Terminated Representation as of 6-30-06

HAND DELIVERED

# SUPPLEMENTAL REGISTRATION FORM

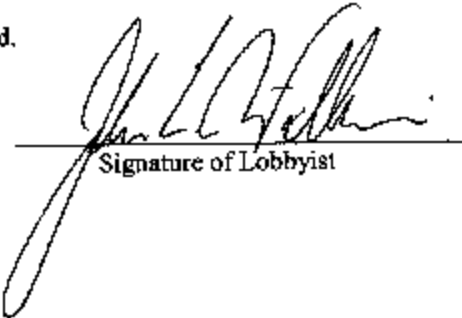


2. Name Beer Industry League of LA  
 Address 575 N 8th St  
 Business or purpose Represent Beer Industry  
☒ New Representation  
 Does this person pay you? Yes  
 If No, who pays you? \_\_\_\_\_  
☐ Terminated Representation as of \_\_\_\_\_

3. Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Business or purpose \_\_\_\_\_  
☐ New Representation  
 Does this person pay you? \_\_\_\_\_  
 If No, who pays you? \_\_\_\_\_  
☐ Terminated Representation as of \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

  
 Signature of Lobbyist